

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/016,686
Filing Date	November 2, 2001
First Named Inventor	KINGSMAN, Susan Mary
Art Unit	1643
Examiner Name	Christopher H. Yaen
Attorney Docket Number	021911-000400US

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ all the attorneys/agents associated with Customer Number 20350


NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: At the request of the client, Oxford BioMedica (UK) Ltd.

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:
- ☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Marshall, Gerstein & Borun LLP		
Address	233 South Wacker Drive 6300 Sears Tower		
City	Chicago	State IL	Zip 60606-6357
Country	US		
Telephone	(312) 474-6300	Email	
Signature			
Name	Karen B. Dow	Registration No.	29,684
Date	January 22, 2008	Telephone No.	858-350-6100

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.